<b>€</b> 2 <b>3</b>								101737,047					
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  Application or Docket Number  607370 (5)													
		CLAIMS AS	-	SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY									
TO	OTAL CLAIMS		16					RATE	FEE	1	RATE	FEE	
FC	DR ·		NUMBER	FILEO	NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		. 0			XS 9=		OR	X\$18=		
INE	DEPENDENT C	LAIMS	2/ mi	nus 3 =	0			X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT							Ī	+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II  OTHER TH  (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENT													
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRE		RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE	
	Total	.16	Minus	- 6	20	= /		X\$ 9=		OR	X\$18=	/	
	Independent	. 2	Minus	***	3	=		X43=		OR	X86=		
	FIRST PRESE	ENTATION OF MULTIPLE DEPENDENT CLAIM						+145=		OR	+290=	7	
<u>.</u>	1.111										TOTAL ADDIT, FEE		
1/	<i>[30]0</i> <b>7</b>	(Column 1)		(Column 2) (Column 3)				DOIT. FEE				y	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BEA SUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 16	Minus	- 2	2	= )	F	X\$ 9=		OR	X\$18=		
	Independent	. 2	Minus	•••	3	=		X43=		OR	X86=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u>'</u>	+145=		OR	+290=		
١,	.,)					•	L	TOTAL DOT, FEE		00	TÓTAL ADDIT, FEE	-	
		(Column 1)		(Colum	nn 2) ·	(Column 3)	A	ANI. FEE			resent. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT · EXTRA		RATE ·	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ž	Total	• ·	Minus	**	•	<b>=</b> .	[	X\$ 9=		OR	X\$18=		
MEN	Independent	•	Minus	***		5		X43=		OR	X86=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=			+290=		
* If the entry in column's is less than the entry in column 2, write "0" in column 3.  " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										OR OR	TOTAL		
-	If the "Highest Nu	mber Previously Pa Imber Previously Pa Inber Previously Pai	eld For IN THE	S SPACE	s less tha	n 3, enter "3."	~	OOIT. FEE	propriate box		ADDIT. FEE lumn 1.		
	1010.475 (0~ 11						Children	and Tendor	nd Office II	e nee		COMMERCE	